<u>Indiana State Police Methamphetamine Laboratory Occurrence Report</u> This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>08-22-2010</u>	Address:	191 Monticello Rd.
Case #:	<u>16F19911</u>		Rochester, IN 46975
County:	Fulton		RV on property
Type of La	iboratory Seizure (check one)	Seizure Location (check all that apply)
hemica	al/Glassware/Equipment (only) te (only)	Outbuilding Vehicle	Open No Structure Other; RV
 Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply) ✓ Lithium/Ammonia Reaction(s): bathroom 			
Red Phosphorous/Iodine Reaction(s): N/A			
☐ Flammable Solvents: <u>bathroom closet</u>			
Water Reactive Metal (Lithium): kitchen area			
Anhydrous Ammonia: <u>N/A</u>			
☐ Hydrochloric Acid Gas Generator(s): <u>N/A</u>			
Corrosive Acid: bathroom closet			
Corrosive Base: bathroom closet			
Other (item and location): N/A			
Child under age 18 discovered (check one) Yes 0 (number present) No *If yes, fax report to Child Protective Services		 Investigative Information ☐ Ephedrine/Pseudoephedrine Tracking Log ☐ Retail/Merchant Tip ☐ Other:Rochester PD Inv. 	
This report is to be faxed to the following agencies that serve the location:			
Fire Depart	ment: Rochester VID	Fax: (574)224-8380	
Health Department: Rochester Health Dep		Fax: <u>(574)</u> Fax: <u>N</u> /A	<u>223-2335</u>
Child Protection Service: N/A			
For further information regarding this methamphetamine laboratory, contact Investigating Officer: <u>Joshua Maller</u> Phone (765) 473-6666			

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

^{***} This form is to be included with the case file, and a copy sent to the Claudestine Laboratory Team Leader for retention.